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Legal Transmission CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 09/15/2004 Mark S. Svat I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. Fay, Sharpe, Fagan, Minnich & McKee, LLP 7th Floor 1100 Superior Avenue Forsyth Cleveland OH 44114-2518 Karen M. (Signature 1370.00 DA (Date 02 FC:1504 300.00 DA CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 12/10/2001 D/A1131 XER 2 0441 9522 10/016,427 Kimon D. Roufas TITLE OF INVENTION: SIX DEGREE OF FREEDOM POSITION RANGING **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE -\$1630\$1670 -s+330 \$1370 12/15/2004 NO \$300 nonprovisional **EXAMINER CLASS-SUBCLASS** ART UNIT 2877 356-399000 LAUCHMAN, LAYLA G Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 FAY, SHARPE, FAGAN, (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, 2 MINNICH & MCKEE. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. K"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) XEROX CORPORATION STAMFORD, CONNECTICUT USA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): XX Issue Fee A check in the amount of the fee(s) is enclosed. XXI Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 24-003/ (enclose an extra copy of this form). ■ Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 104 22 Authorized Signature Typed or printed name _ Mark S Svat Registration No.

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